

Bureau of Health Care Quality and Compliance

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS3106AGC | (X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____ | | (X3) DATE SURVEY COMPLETED C 01/13/2011 |
| NAME OF PROVIDER OR SUPPLIER LAWRENCE HOMES 2 LLC | | | STREET ADDRESS, CITY, STATE, ZIP CODE 5305 MEADOWS LILLY AVE LAS VEGAS, NV 89108 | | |
| (X4) ID PREFIX TAG | SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION) | ID PREFIX TAG | PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY) | (X5) COMPLETE DATE | |
| Y 000 | Initial Comments The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility on 1/13/11. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division. The facility is licensed for six (6) Residential Facility for Group beds which provide care to persons with Alzheimer's disease, Category II residents. The census at the time of the survey was four. Four resident files were reviewed and three employee files were reviewed. One discharged resident file was reviewed. The facility received a grade of D. The following deficiencies were identified: | Y 000 | | | |
| Y 103 SS=E | 449.200(1)(d) Personnel File - NAC 441A / Tuberculosis NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee. | Y 103 | | | |

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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| Y 103 | Continued From page 1 This Regulation is not met as evidenced by: Based on record review on 1/13/11, the facility failed to ensure 1 of 3 employees complied with NAC 441A.375 regarding tuberculosis (TB) testing for the protection of all residents (Employee #3- missing 2nd step TB test). Severity: 2 Scope: 2 | Y 103 | | | |
| Y 105 SS=F | 449.200(1)(f) Personnel File - Background Check NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive. This Regulation is not met as evidenced by: Based on record review on 1/13/11, the facility failed to ensure 2 of 3 employees met background check requirements of NRS 449.176 to 449.188 (Employee #1-missing FBI results from 2009 fingerprints and Employee #2- no complete set of State and FBI background results from 2004 or 2010 fingerprints). Severity: 2 Scope: 3 | Y 105 | | | |
| Y 178 SS=F | 449.209(5) Health and Sanitation-Maintain Int/Ext | Y 178 | | | |

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| Y 178 | Continued From page 2 NAC 449.209 5. The administrator of a residential facility shall ensure that the premises are clean and that the interior, exterior and landscaping of the facility are well maintained. This Regulation is not met as evidenced by: Based on observation on 1/13/11, the facility failed to ensure the premises were clean and well maintained (hall ceiling vent was dirty, dishes were overflowing in kitchen sink, no lids on overflowing garbage cans throughout the facility and the stove, oven and refrigerator were covered with food and other debris). Severity: 2 Scope: 3 | Y 178 | | |
| Y 274 SS=C | 449.2175(5) Service of Food - Substitutions NAC 449.2175 5. Any substitution for an item on the menu must be documented and kept on file with the menu for at least 90 days after the substitution occurs. A substitution must be posted in a conspicuous place during the service of the meal. This Regulation is not met as evidenced by: Based on observation and interview on 1/13/11, the facility failed to follow the posted menu and ensure that menu substitutions were documented | Y 274 | | |

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| Y 274 | Continued From page 3 and retained for at least 90 days. Severity: 1 Scope: 3 | Y 274 | | | |
| Y 435 SS=C | Blank This Regulation is not met as evidenced by: Based on observation on 1/13/11, the facility failed to ensure that 3 of 3 facility fire extinguishers were inspected annually (inspection tags indicated that they had not inspected since January 2008). Severity: 1 Scope: 3 | Y 435 | | | |
| Y 557 SS=E | 449.262(3)(a) Restriction on Use of Restraints NAC 449.262 3. The members of the staff of a residential facility shall not: (a) Use restraints on any resident. This Regulation is not met as evidenced by: Based on observation on 1/13/11, the facility failed to ensure that mechanical restraints were not used on 1 of 4 residents (a bed rail was found on Resident #4's bed). Severity: 2 Scope: 2 | Y 557 | | | |

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| Y 693 | Continued From page 4 | Y 693 | | | |
| Y 693 SS=C | <p>449.2712(2) Oxygen-Caregiver monitor resident ability</p> <p>NAC 449.2712</p> <p>2. The caregivers employed by a residential facility with a resident who requires the use of oxygen shall:</p> <p>(a) Monitor the ability of the resident to operate the equipment in accordance with the orders of a physician.</p> <p>(b) Ensure That:</p> <p>(1) The resident's physician evaluates periodically the condition of the resident which necessitates his use of oxygen;</p> <p>(2) Signs which prohibit smoking and notify persons that oxygen is in use are posted in areas of the facility in which oxygen is in use or is being stored;</p> <p>(3) Persons do not smoke in those areas where smoking is prohibited;</p> <p>(4) All electrical equipment is inspected for defects which may cause sparks.</p> <p>(5) All oxygen tanks kept in the facility are secured in a stand or to a wall;</p> <p>(6) The equipment used to administer oxygen is in good working condition;</p> <p>(7) A portable unit for the administration of oxygen in the event of a power outage is present in the facility at all times when a resident who requires oxygen is present in the facility; and</p> <p>(8) The equipment used to administer oxygen is removed from the facility when it is no longer needed by the resident.</p> | Y 693 | | | |

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| Y 693 | Continued From page 5 This Regulation is not met as evidenced by: Based on observation and interview on 1/13/11, the facility failed to follow the posted smoking policy regarding no smoking in the facility (caregiver admitted to smoking in a bedroom). Severity: 1 Scope: 3 | Y 693 | | | |
| Y 877 SS=E | 449.2742(5) OTC medications & Dietary Supplements NAC 449.2742 5. An over-the-counter medication or a dietary supplement may be given to a resident only if the resident's physician has approved the administration of the medication or supplement in writing or the facility is ordered to do so by another physician. The over-the-counter medication or dietary supplement must be administered in accordance with the written instructions of the physician. The administration of over-the-counter medication and dietary supplements must be included in the record required pursuant to paragraph (b) of subsection 1 of NAC 449.2744. This Regulation is not met as evidenced by: Based on record review and interview on 1/13/11, the facility did not obtain physician orders to administer over-the-counter (OTC) medications to 1 of 4 residents (Resident #1- no order for | Y 877 | | | |

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| Y 877 | Continued From page 6 Calcium Carbonate 600 milligrams with Vitamin D 3). | Y 877 | | | |
| | Severity: 2 Scope: 2 | | | | |
| Y 878 SS=F | 449.2742(6)(a)(1) Medication / Change order NAC 449.2742 6. Except as otherwise provided in this subsection, a medication prescribed by a physician must be administered as prescribed by the physician. If a physician orders a change in the amount or times medication is to be administered to a resident: (a) The caregiver responsible for assisting in the administration of the medication shall: (1) Comply with the order. This Regulation is not met as evidenced by: Based on record review and interview on 1/13/11, the facility failed to ensure that 3 of 4 residents received medications as prescribed. Findings include Resident #1- Viokase: 8 tablets a day- had been signed as given, but the medication was not in the facility and available to be given. There was an order for Tylenol 500 milligrams (mg), twice a day, but the resident was being given 650 mg, twice a day. Resident #3- there was an order for Risperidone | Y 878 | | | |

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| Y 878 | Continued From page 7 0.25 mg, one tablet at bedtime; but the medication administration record (MAR) stated to give 0.5 mg in the morning. There was an order for Aricept 10 mg to be given at bedtime; the medication was being given in the morning. Resident #4- Amlodipine Besylate 5 mg had been prescribed but had not been listed on the MAR. Severity: 2 Scope: 3 | Y 878 | | | |
| Y 883 SS=E | 449.2742(7) Medication / Resident Refusal NAC 449.2742 7. If a resident refuses, or otherwise misses, and administration of medication, a physician must be notified within 12 hours after the dose is refused or missed. This Regulation is not met as evidenced by: Based on observation and interview on 1/13/11, the facility failed to ensure the physician was notified within 12 hours after a medication was missed or refused for 1 of 4 residents (Resident #1 -Viokase- 8 tablets a day had not been given for approximately 13 days and the physician had not been notified. Caregiver stated that the resident's son could no longer afford to purchase the medication). Severity: 2 Scope: 2 | Y 883 | | | |

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| Y 895 | Continued From page 8 | Y 895 | | | |
| Y 895 SS=C | <p>449.2744(1)(b)(1) Medication / MAR</p> <p>NAC 449.2744</p> <p>1. The administrator of a residential facility that provides assistance to residents in the administration of medication shall maintain:</p> <p>(b) A record of the medication administered to each resident. The record must include:</p> <p>(1) The type of medication administered;</p> <p>(2) The date and time that the medication was administered;</p> <p>(3) The date and time that a resident refuses, or otherwise misses, an administration of medication; and</p> <p>(4) Instructions for administering the medication to the resident that reflect the current order or prescription of the resident's physician.</p> <p>This Regulation is not met as evidenced by: Based on record review and interview on 1/13/11, the facility failed to ensure the medication administration record (MAR) was accurate for 3 of 4 residents (Resident #1, #3 and #4).</p> <p>Severity: 1 Scope: 3</p> | Y 895 | | | |
| Y 936 SS=E | 449.2749(1)(e) Resident file-NRS 441A Tuberculosis | Y 936 | | | |

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| Y 936 | Continued From page 9 NAC 449.2749 1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto. This Regulation is not met as evidenced by: Based on record review on 1/13/11, the facility failed to ensure 2 of 4 residents complied with NAC 441A.380 regarding tuberculosis testing (Resident #3 and #4- missing an annual TB test for 2010) which affected all residents. Severity: 2 Scope: 2 | Y 936 | | | |
| Y 991 SS=F | 449.2756(1)(b) Alzheimer's Fac door alarm NAC 449.2756 1. The administrator of a residential facility which provides care to persons with Alzheimer's disease shall ensure that: (b) Operational alarms, buzzers, horns or other audible devices which are activated when a door is opened are installed on all doors that may be used to exit the facility. | Y 991 | | | |

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| Y 991 | Continued From page 10 This Regulation is not met as evidenced by: Based on observation on 1/13/11, the facility failed to ensure that 2 of 3 of exit doors had installed alarms that operated when the exit door was opened (front and back patio exit doors). Severity: 2 Scope: 3 | Y 991 | | | |
| Y 999 SS=F | 449.2754(1)(g) Alzheimer's Facility-Toxic substances NAC 449.2756 1. The administrator of a residential facility which provides care to persons with Alzheimer's disease shall ensure that: (g) All toxic substances are not accessible to the residents of the facility. This Regulation is not met as evidenced by: Based on observation on 1/13/11, the facility failed to ensure toxic substances were inaccessible to 4 of 4 residents (Mouthwash and aftershave were found under a bathroom sink; which was located between bedroom #2 and #3). Severity: 2 Scope: 3 | Y 999 | | | |

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